

<p><b>Instructions ▼</b></p> <p>Check the box to the right if your case involves parental responsibility or parenting time (custody/visitation rights) or relocation of a child.</p> <p>Enter the appellate court case number.</p> <p>Just below "In the Appellate Court of Illinois," enter the number of the appellate district where the appeal was filed.</p>	<div style="border: 1px solid black; padding: 10px; margin-bottom: 10px;"> <input type="checkbox"/> <b>THIS APPEAL INVOLVES A MATTER SUBJECT TO EXPEDITED DISPOSITION UNDER RULE 311(a).</b> </div> <div style="text-align: center; margin-bottom: 20px;"> <p><b>Appellate Case No.:</b> _____</p> <p><b>IN THE APPELLATE COURT OF ILLINOIS</b></p> <p>_____ <b>District</b></p> </div>	
<p>If the case name in the trial court began with "In re" (for example, "In re Marriage of Jones"), enter that phrase. If the case name did not begin with "In re," enter the names of the parties as they appeared in the trial court documents. Below each party name check either <b>Appellant</b> if the party filed the appeal or <b>Appellee</b> if the party is responding to the appeal.</p>	<p><b>In re</b> _____</p> <p>_____</p> <p><b>Plaintiff/Petitioner</b> in trial court (<i>First, middle, last name</i>)</p> <p><input type="checkbox"/> <b>Appellant</b>    <input type="checkbox"/> <b>Appellee</b></p> <p>v.</p> <p>_____</p> <p><b>Defendant/Respondent</b> in trial court (<i>First, middle, last name</i>)</p> <p><input type="checkbox"/> <b>Appellant</b>    <input type="checkbox"/> <b>Appellee</b></p>	<p><b>Appeal from the Circuit Court of</b> _____ <b>County</b></p> <p><b>Trial Court Case No:</b> _____</p> <p><b>Trial Judge:</b> _____</p> <p><b>Date of Notice of Appeal:</b> _____</p> <p><b>Date Judgment was entered:</b> _____</p> <p><b>Date Post-Judgment Motion was ruled on:</b> _____</p> <p><b>Supreme Court Rule:</b> _____</p>
<p>At the far right, enter the trial court county, trial court case number, the trial judge's name, date of the notice of appeal, date of the judgment, date of the ruling on any post-judgment motion, and the Supreme Court Rule that allows the appellate court to hear the appeal.</p>		

<p>In 1, check "Yes" if this appeal is related to another appeal and write the docket (case) number of any other appeal. Check "No" if this appeal is not related to another appeal.</p>	<div style="text-align: center; margin-bottom: 20px;"> <p><b>DOCKETING STATEMENT (CIVIL)</b></p> </div> <p><b>1.</b> Is this a cross-appeal, separate appeal, joining in a prior appeal, or related to another appeal that is currently pending or that has been decided by this court?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, list the docket numbers of the other appeals: _____</p>
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In 2, if any party, either Appellant or Appellee, is a corporation or business association, write the name of any company related to that corporation or business association.

In 3, enter your full name and other contact information. If there are other appellants besides you, include all their names and contact information on the *Additional Appellant Information* form and attach it to this *Docketing Statement (Civil)* and put a check in the box. If you have a lawyer, fill in their information below "Lawyer on Appeal for appellant filing this statement." If there is more than one lawyer for the appellants, check the box and fill out the *Additional* form. Insert it after this page.

In 4, you must enter the full name and contact information for all appellees you are filing your appeal against. If there is more than one appellee, include all their names and contact information on the *Additional Appellee Information* form and put a check in the box. You must also enter the full name and contact information for each lawyer. If you don't know the name of an appellee's lawyer, fill in the name and address of their trial lawyer. If there is more than one appellee or more than one lawyer for the appellee, check the box and fill out the *Additional Lawyer on Appeal Information* form. Insert it after this page.

2. If any party is a corporation or association, identify any affiliate, subsidiary, or parent group:

3. Full name and complete address of appellant filing this statement:

<i>First</i>	<i>Middle</i>	<i>Last</i>
<i>Street, Apt #</i>		<i>Telephone number</i>
<i>City</i>	<i>State</i>	<i>ZIP</i>
		<i>Email address</i>

☐ I have listed additional appellants on the *Additional Appellant Information* form.

Lawyer on Appeal for appellant filing this statement:

<i>First</i>	<i>Middle</i>	<i>Last</i>
<i>Street, Apt #</i>		<i>Telephone number</i>
<i>City</i>	<i>State</i>	<i>ZIP</i>
		<i>Email address</i>
<i>Lawyer Registration Number</i>		<i>Fax number</i>

☐ I have listed additional lawyers on the *Additional Lawyer on Appeal Information* form.

4. Full name and complete address of appellee:

<i>First</i>	<i>Middle</i>	<i>Last</i>
<i>Street, Apt #</i>		<i>Telephone number</i>
<i>City</i>	<i>State</i>	<i>ZIP</i>
		<i>Email address</i>

☐ I have listed additional appellees on the *Additional Appellee Information* form.

Lawyer for appellee:

<i>First</i>	<i>Middle</i>	<i>Last</i>
<i>Street, Apt #</i>		<i>Telephone number</i>
<i>City</i>	<i>State</i>	<i>ZIP</i>
		<i>Email address</i>
<i>Lawyer Registration Number</i>		<i>Fax number</i>

☐ I have listed additional lawyers on the *Additional Lawyer on Appeal Information* form.

In **5**, enter the name and address of the court reporter who recorded the hearing in the trial court. If the hearing was electronically recorded, contact the trial court clerk's office to order the transcript. If there was no court reporter or recording, then leave **5** blank.

In **5**, if there was more than one court reporter, check the box and fill out the *Additional Court Reporter Information* form. Insert it before this page.

In **6**, check "Yes" if your case involves parental responsibility or parenting time (custody/visitation rights) or relocation of a child. There are special rules that apply to speed up these appeals.

In **7**, briefly write down your reasons for filing this appeal. If you don't list a reason here, you will still be able to bring it up later.

In **8a**, enter the date you filed your Request for Preparation of Record on Appeal with the trial court.

In **8b**, enter the date you delivered your Request for Report of Proceedings (Transcripts) to the court reporter you listed above in **5**. If there was no court reporter or recording, leave **8b** blank.

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name.

**5. Court reporter information:**

*First*

*Middle*

*Last*

*Street Address*

*City*

*State*

*Zip*

*Telephone*

*Email address*

☐ I have listed additional court reporters on the *Additional Court Reporter Information* form.

**6. Is this appeal from a final order in a matter involving child custody, allocation of parental responsibilities, or relocation of a minor child under Illinois Supreme Court Rule 311(a), which requires **Mandatory Accelerated Disposition**?**

☐ Yes ☐ No

If yes, this *Docketing Statement (Civil)*, and all other notices, briefs, motions, and pleadings filed by any party shall include the following statement in bold type on the top of the front page:

**THIS APPEAL INVOLVES A MATTER SUBJECT TO EXPEDITED DISPOSITION UNDER RULE 311(a).**

**7. State the general issues you want to raise in your appeal:**

**8. I certify that**

a. on this date \_\_\_\_\_ I filed a request with the trial court clerk to  
*Date*  
prepare the appeal record on appeal.

b. on this date \_\_\_\_\_ I made a written request to the court reporting  
*Date*  
personnel to prepare the transcripts, a copy of which is attached to this *Docketing Statement*.

/s/

*Your Signature*

*Street Address*

*Print Your Name*

*City, State, ZIP*

*Telephone*

**GETTING COURT DOCUMENTS BY EMAIL:** If you agree to receive court documents by email, check the box below and enter your email address. You should use an email account that you do not share with anyone else and that you check every day. If you do not check your email every day, you may miss important information or notice of court dates. Other parties may still send you court documents by mail.

- ☐ I agree to receive court documents at this email address during my entire case.

\_\_\_\_\_  
Email

**PROOF OF SERVICE (You must serve the other party and complete this section)**

In **1a**, enter the name, mailing address, and email address of the party or lawyer to whom you sent the document.

In **1b**, check the box to show how you sent the document, and fill in any other information required on the blank lines.

**CAUTION:** If the other party does not have a lawyer, you may send the document by email only if the other party has listed their email address on a court document.

In **c**, fill in the date and time that you sent the document.

In **2**, if you sent the document to more than 1 party or lawyer, fill in **a**, **b**, and **c**. Otherwise leave **2** blank.

1. I sent this document:

a. To:

Name: \_\_\_\_\_

*First*

*Middle*

*Last*

Address: \_\_\_\_\_

*Street, Apt #*

*City*

*State*

*ZIP*

Email address: \_\_\_\_\_

b. By:

☐

Personal hand delivery

☐

Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

\_\_\_\_\_  
*Address of Post Office or Mailbox*

☐

Third-party commercial carrier, with delivery paid for at:

\_\_\_\_\_  
*Name (for example, FedEx or UPS) and office address*

☐

The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)

☐

Email (not through an EFM or EFSP)

☐

Mail from a prison or jail at:

\_\_\_\_\_  
*Name of prison or jail*

c. On:

\_\_\_\_\_  
*Date*

At:

\_\_\_\_\_  
*Time*

☐

a.m.

☐

p.m.

2. I sent this document:

a. To:

Name: \_\_\_\_\_

*First*

*Middle*

*Last*

Address: \_\_\_\_\_

*Street, Apt #*

*City*

*State*

*ZIP*

Email address: \_\_\_\_\_

b. By:

☐

Personal hand delivery

☐

Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

\_\_\_\_\_  
*Address of Post Office or Mailbox*

☐

Third-party commercial carrier, with delivery paid for at:

\_\_\_\_\_  
*Name (for example, FedEx or UPS) and office address*

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Email (not through an EFM or EFSP)

☐ Mail from a prison or jail at:

\_\_\_\_\_  
*Name of prison or jail*

c. On: \_\_\_\_\_  
*Date*

At: \_\_\_\_\_ ☐ a.m. ☐ p.m.  
*Time*

In 3, if you sent the document to more than 2 parties or lawyers, fill in **a**, **b**, and **c**. Otherwise leave 3 blank.

3. I sent this document:

a. To:

Name: \_\_\_\_\_

*First*

*Middle*

*Last*

Address: \_\_\_\_\_

*Street, Apt #*

*City*

*State*

*ZIP*

Email address: \_\_\_\_\_

b. By: ☐ Personal hand delivery

☐ Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

\_\_\_\_\_  
*Address of Post Office or Mailbox*

☐ Third-party commercial carrier, with delivery paid for at:

\_\_\_\_\_  
*Name (for example, FedEx or UPS) and office address*

☐ The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)

☐ Email (*not through an EFM or EFSP*)

☐ Mail from a prison or jail at:

\_\_\_\_\_  
*Name of prison or jail*

c. On: \_\_\_\_\_  
*Date*

At: \_\_\_\_\_ ☐ a.m. ☐ p.m.  
*Time*

If you are serving more than 3 parties or lawyers, check the box and fill out an *Additional Proof of Service* form. Insert it after this page.

☐ I have completed an *Additional Proof of Service* form.

Under the Code of Civil Procedure, [735 ILCS 5/1-109](#), making a statement on this form that you know to be false is perjury, a Class 3 Felony.

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign by hand and print your name.

**I certify that everything in the Proof of Service is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under [735 ILCS 5/1-109](#).**

/s/

\_\_\_\_\_  
*Your Signature*

\_\_\_\_\_  
*Print Your Name*